

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Michel F. Lévesque and Toomas Neuman
 Serial No. Not Assigned
 Filed: Herewith
 For: **TRANSDIFFERENTIATION OF EPIDERMAL BASAL CELLS
INTO NEURAL PROGENITOR CELLS, NEURONAL CELLS
AND/OR GLIAL CELLS**

Examiner: Unassigned
 Unit: --

DECLARATION UNDER 37 C.F.R. § 1.821(f) and (g)

Box New Patent Application
 Assistant Commissioner for Patents
 Washington, D. C. 20231

CERTIFICATE OF EXPRESS MAIL	
I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE AND LABEL INDICATED BELOW AND IS ADDRESSED TO BOX NEW PATENT APPLICATION, THE ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D. C. 20231.	
<u>01/20/00</u> DATE OF DEPOSIT	<u>ANN WEISS</u> NAME OF PERSON MAKING DEPOSIT
 SIGNATURE OF PERSON MAKING DEPOSIT	
<u>EI 243 343 122 US</u> EXPRESS MAIL LABEL NUMBER	

I, Nisan A. Steinberg, Ph.D., hereby state, as required by 37 C.F.R. § 1.821(f), that the content of the paper and computer readable copies of the enclosed sequence listing, submitted in accordance with 37 C.F.R. § 1.821(c) and (e), respectively, are to the best of my knowledge, the same, and are the same as the sequences disclosed in the application as filed.

I hereby also state, as required by 37 C.F.R. § 1.821(g), that to the best of my knowledge, the enclosed submission includes no new matter.

Respectfully submitted,

PRETTY, SCHROEDER & POPLAWSKI, P.C.


 Nisan A. Steinberg, Ph.D., Reg. No. 40,345
 Attorneys for Applicant

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**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) AND 1.27 (d)) - NONPROFIT ORGANIZATION**

Docket No.
CEDAR 042638

Serial No. NOT ASSIGNED	Filing Date HEREWITH	Patent No. —	Issue Date —
Applicant/ Michel F. Lévesque and Toomas Neuman Patentee:			
Invention: TRANSDIFFERENTIATION OF EPIDERMAL BASAL CELLS INTO NEURAL PROGENITOR CELLS, NEURONAL CELLS AND/OR GLIAL CELLS			

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: **CEDARS-SINAI MEDICAL CENTER**

ADDRESS OF ORGANIZATION: **8700 Beverly Boulevard**

Los Angeles, CA 90048-1848

TYPE OF NONPROFIT ORGANIZATION:

- University or other Institute of Higher Education
- Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3))
- Nonprofit Scientific or Educational under Statute of State of The United States of America
Name of State: _____ Citation of Statute: _____
- Would Qualify as Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3)) if Located in The United States of America
- Would Qualify as Nonprofit Scientific or Educational under Statute of State of The United States of America if Located in The United States of America
Name of State: _____ Citation of Statute: _____

I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 C.F.R. 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- the specification to be filed herewith.
- the application identified above.
- the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the above-identified nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- no such person, concern or organization exists.
- each such person, concern or organization is listed below.

FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
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FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: PETER E. BRAVEMAN, ESQ.
 TITLE IN ORGANIZATION: Senior Vice President for Legal Affairs and General Counsel
 ADDRESS OF PERSON SIGNING:

SIGNATURE:

DATE:

1/19/2000

Docket No.
CEDAR 042638

Declaration For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

TRANSDIFFERENTIATION OF EPIDERMAL BASAL CELLS INTO NEURAL PROGENITOR CELLS, NEURONAL CELLS AND/OR GLIAL CELLS

the specification of which

(check one)

is attached hereto.

was filed on _____ as United States Application No. or PCT International Application Number _____
and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

(Application Serial No.)

(Filing Date)

(Application Serial No.)

(Filing Date)

(Application Serial No.)

(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

US Serial No. : 09/234,332

January 20, 1999

Pending

(Application Serial No.)

(Filing Date)

(Status)

(patented, pending, abandoned)

(Application Serial No.)

(Filing Date)

(Status)

(patented, pending, abandoned)

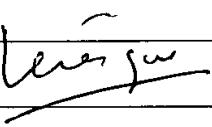
(Application Serial No.)

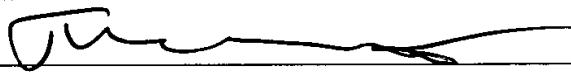
(Filing Date)

(Status)

(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Michel F. Lévesque	Sole or first inventor's signature 	Date 1/19/2000
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Citizenship U.S.A.		
Post Office Address Same as above		

Full name of second inventor, if any Toomas Neuman, Ph.D.		
Second inventor's signature 	Date 01/19/2000	
Residence 1325 26th Street, Unit A, Santa Monica, CA 90404		
Citizenship Estonia		
Post Office Address Same as above.		

Full name of third inventor, if any		
Third inventor's signature	Date	
Residence		
Citizenship		
Post Office Address		

Full name of fourth inventor, if any		
Fourth inventor's signature	Date	
Residence		
Citizenship		
Post Office Address		